

012204

16367

PTO/SB/05 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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U.S. PTO
UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonapplications under 37C.F.R. §1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

Attorney Docket No. PC24990A

First Inventor SUSAN M. DANEHOWER

Title NEW METHOD FOR TREATING URINARY DISORDERS

Express Mail Label No. EL163958238US

ADDRESS TO:
Mail Stop PATENT APPLICATION
Commissioner for Patents
Box 1450
Alexandria, VA 22313-1450

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. Applicant claims small entity status
See 37 CFR 1.27

3. Specification [Total Pages 12]
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total sheets]

5. Oath or Declaration [Total pages]
a. Newly executed (original or copy)
b. Copy from a prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 18 completed)

- i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6.. Application Data Sheet. See 37 CFR 1.76

7. CD-ROM or CD-R in duplicate, large table or computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. Computer Readable Copy (CRF)
- b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies)
 - ii. Paper
- c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)

11. English Translation Document (if applicable)

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17. Other:

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76.

Continuation Divisional Continuation-in-part (CIP) of prior application No: 60/ 441,690

Prior application information: Examiner _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number	23913	<input type="checkbox"/> Correspondence address below
Name		
Address		
City	State	Zip Code
Country	Telephone	Fax

NAME (Print/Type)	CRAIG M. BELL	Registration No. (Attorney/Agent)	31,812
Signature	<i>Craig M. Bell</i>	Date <i>1/21/04</i>	JANUARY 22, 2004

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 22 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL

for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small status. See 37 CFR 1.27**Total Amount of Payment** **\$1060.00****METHOD OF PAYMENT (check all that apply)**
 Check Credit Card Money Other None
Order
 Deposit Account:

16-1445

Pfizer Inc

The Director is authorized to: (check all that apply)
 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee
to the above-identified deposit account.
FEE CALCULATION**1. BASIC FILING FEE****Larg Entity** **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2203	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	filng fee	

Subtotal (1)s **\$ 770****2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	15	- 20** =	0	x	Fee from below	Fee Paid
Independent Claims	2	- 3 =	0	x		
Multiple Dependent					290	= 290

Large Entity **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue independent claims over original patent

(\$ 290)

**or number previously paid, if greater; For Reissues, see above

Complete if Known									
Application Number		NOT YET ASSIGNED							
Filing Date		NOT YET ASSIGNED							
First Named Inventor		SUSAN M. DANEHOWER							
Examiner Name		NOT YET ASSIGNED							
Art Unit		NOT YET ASSIGNED							
Attorney Docket No.		PC24990A							
FEE CALCULATION (continued)									
3. ADDITIONAL FEES									
Large Entity		Small Entity							
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid				
1051	130	2051	65	Surcharge - late fee or oath					
1052	50	2052	25	Surcharge-late filing fee or cover sheet					
1053	130	1053	130	Non-English specification					
1812	2,520	1812	2,520	For filing a request for <i>Ex Parte</i> reexamination					
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action					
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action					
1251	110	2251	55	Extension for reply within first month					
1252	420	2252	210	Extension for reply within second month					
1253	950	2253	475	Extension for reply within third month					
1254	1,480	2254	740	Extension for reply within fourth month					
1255	2,010	2255	1,005	Extension for reply within fifth month					
1401	330	2401	165	Notice of Appeal					
1402	330	2402	165	Filing a brief in support of an appeal					
1403	290	2403	145	Request for oral hearing					
1451	1,510	1451	1,510	Petition to institute a public use proceeding					
1452	110	2452	55	Petition to revive unavoidable					
1453	1,330	2453	665	Petition to revive - unintentional					
1501	1,330	2501	665	Utility issue fee (or reissue)					
1502	480	2502	240	Design issue fee					
1503	640	2503	320	Plant issue fee					
1460	130	1460	130	Petitions to the Commissioner					
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)					
1806	180	1806	180	Submission of Information Disclosure Stmt					
8021	40	8021	40	Recording each patent assignment per property (times number of properties)					
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))					
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))					
1801	770	2801	385	Request for Continued Examination (RCE)					
1802	900	1802	900	Request for expedited examination of a design application					
Other Fee (specify) _____									
*Reduced by Basic Filing Fee Paid									
Subtotal (3) (\$)									

(Complete if applicable)

SUBMITTED BY

Name (Printed/Type)	CRAIG M. BELL	Registration No. (Attorney Agent)	31,812	Telephone	(212) 733-8791
Signature	<i>Craig M. Bell</i>			Date	January 22, 2004

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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